# UNITED STATES DISTRICT COURT DISTRICT OF NEW JERSEY

please write "see attached" in the space and attach an

additional page with the full list of names.)

| ANDRE COLLIER  | Complaint for Employment   |
|--|--|
|  | Discrimination   |
| (In the space above enter the full name(s) of the plaintiff(s).) | Case No. 16-5431 (PGS TJB) (to be filled in by the Clerk's Office) |
| -against-<br>LOCALBIYSS, TUE-CWX                                 | Jury Trial:  |
| (Write the full name of each defendant who is being sued. If     | ;  |

## I. The Parties to This Complaint

# A. The Plaintiff(s)

В.

|                               | w for each plaintiff named in the complaint. Attach   |
|-------------------------------|---|
| additional pages if needed.   |   |
| Name                          | ANDE COLLEC   |
| Street Address                | 34 Baylinster   |
| City and County               | TRENTON, MERER  |
| State and Zip Code            | NEW JERSEY 08618  |
| Telephone Number              |   |
|                               |   |
|                               |   |
| The Defendant(s)              |   |
| whether the defendant is an i | w for each defendant named in the complaint, individual, a government agency, an organization, or dual defendant, include the person's job or title (if ages if needed. |
| Defendant No. 1               |   |
| Name                          | MARKWILLIAMS/Local 81455  |
| Job or Title                  | Union REP / Shop STEWART  |
| (if known)                    | 11    |
| Street Address L              | DEAL 455 1206 HAMITON AVE /2231= STUTE S  |
| City and County               | TRENTON MERCER  |
| State and Zip Code            | 0 0 NEW J=RS=/ 08629/@ 08619  |
| Telephone Number              |   |
| E-mail Address                |   |
| (if known)                    |   |
| Defendant No. 2               |   |
| Name                          | LOCAL 81455 IUE CWX   |
| Job or Title                  | ,   |
| (if known)                    |   |
| Street Address                | 1206 Hamilton XV=   |
| City and County               | TRENTON MERCER  |

| State and Zip Code          | NEW JASEY 08679                                    |
|-----------------------------|--|
| Telephone Number            | (609) 393-01725                                    |
| E-mail Address              |  |
| (if known)                  |  |
| Defendant No. 3             | !  |
| Name                        | :  |
| Job or Title<br>(if known)  |  |
| Street Address              |  |
| City and County             |  |
| State and Zip Code          |  |
| Telephone Number            |  |
| E-mail Address              |  |
| (if known)                  |  |
| Defendant No. 4             |  |
| Name                        | <u> </u>   |
| Job or Title                |  |
| (if known)                  |  |
| Street Address              |  |
| City and County             |  |
| State and Zip Code          |  |
| Telephone Number            |  |
| E-mail Address              |  |
| (if known)                  |  |
| Place of Employment         |  |
| The address at which I soug | tht employment or was employed by the defendant(s) |
|                             | TRAVE / TUDEREN RAND                               |
| Name                        | 2721 - (TIL- (T                                    |
| Street Address              | 10-16 1 M-11=1                                     |
| City and County             | 11-11-11-11-11-11-11-11-11-11-11-11-11-            |
| State and Zip Code          | N=W J=PS=Y U8617                                   |
| Telephone Number            | (607/581-3136                                      |

C.

#### II. **Basis for Jurisdiction**

This

| This action apply): | on is brought for discrimination in employment pursuant to (check all that  |
|---------------------|---|
| V                   | Title VII of the Civil Rights Act of 1964, as codified, 42 U.S.C. §§ 2000e to 2000e-17 (race, color, gender, religion, national origin).  |
|                     | (Note: In order to bring suit in federal district court under Title VII, you must first obtain a Notice of Right to Sue letter from the Equal Employment Opportunity Commission.)                           |
|                     | Age Discrimination in Employment Act of 1967, as codified, 29 U.S.C. §§ 621 to 634.   |
|                     | (Note: In order to bring suit in federal district court under the Age Discrimination in Employment Act, you must first file a charge with the Equal Employment Opportunity Commission.)                     |
|                     | Americans with Disabilities Act of 1990, as codified, 42 U.S.C. §§ 12112 to 12117.  |
|                     | (Note: In order to bring suit in federal district court under the Americans with Disabilities Act, you must first obtain a Notice of Right to Sue letter from the Equal Employment Opportunity Commission.) |
|                     | Other federal law (specify the federal law);  S=XUAL OKI=N+A+ion / +DiCURE +O PROPERTY  P= ONE SENTE  |
|                     | Relevant state law (specify, if known):   |
|                     | Relevant city or county law (specify, if known):  |

#### III. **Statement of Claim**

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

| A. | The discriminatory conduct of which I complain in this action includes (check that apply): |  |  |  |  |
|----|--|--|--|--|--|
|    |  | Failure to hire me.  |  |  |  |
|    |  | Termination of my employment.  |  |  |  |
|    |  | Failure to promote me.   |  |  |  |
|    |  | Failure to accommodate my disability.  |  |  |  |
|    | X  | Unequal terms and conditions of my employment.   |  |  |  |
|    |  | Retaliation.   |  |  |  |
|    |  | Other acts (specify):  |  |  |  |
|    | (Note  | : Only those grounds raised in the charge filed with the Equal   |  |  |  |
|    | -  | oyment Opportunity Commission can be considered by the federal ct court under the federal employment discrimination statutes.) |  |  |  |
| В. | It is my best  | recollection that the alleged discriminatory acts occurred on date(s)  |  |  |  |
|    | 2009   | to Present   |  |  |  |
| C. | I believe that   | defendant(s) (check one):  |  |  |  |
|    |  | is/are still committing these acts against me.   |  |  |  |
|    |  | is/are not still committing these acts against me.   |  |  |  |
| D. |  | discriminated against me based on my (check all that apply and   |  |  |  |
|    | explain):  | .1.0   |  |  |  |
|    | 屋  | race Ato America color BLACIC  |  |  |  |
|    |  |  |  |  |  |
|    |  | gender/sex GAY BAY MAN   |  |  |  |
|    |  | religion   |  |  |  |
|    |  | national origin  |  |  |  |
|    |  | age. My year of birth is (Give your year of birth only if you are asserting a claim of age discrimination.)                    |  |  |  |
|    |  | disability or perceived disability (specify disability)  |  |  |  |
|    |  |  |  |  |  |

I NOTE COLLIE IS withouthis GREVIENCE/CHARGES, AgriNST MARK WILLIAMS IN H.R. I STATED SEVERIL NUMES AS Witnesses most Importantly Richard Williams to the Events that took plue on 2-615+ 2-27-15 DN 3-10-15 TINA JENNINGS + KEHL HIGHTOWIR WIEE CALLEDIN XS witness for Luckie Lynch ON 3-13-15 I was given & warning From the Company for discuptive behavior when I asked Mark Williams why WARE MONE of my withELS CALLED IN, the RESPONCE he gave me confirmed what I always suspected Mackletilliam is Not for the TRAVE = mpby = SS he suppose to REPRESENT NS X ULUSN REP. BASED ON THE RESPONCE & in-Action of Mr. W. Vigns I bring forth this charges on him. HE Adoug with The Company did not do & thought

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INVESTIGATION. NOR did Me. Williams Put in A graviance on my bahalf I Audis Collie Also want the letter to serve notice to MARK william is to NEVEL REPRESENT ME AgaIN X & Shop STEWART OR UNION KEP

|     | E.  | The facts of my case are as follows. Attach additional pages if needed.  |  |  |  |
|-----|---|--|--|--|--|
|     | -   | MANGGEMENT has been harrassing me<br>Since 2009-Present as such I went to the<br>Union local 81455 And submitted many<br>grievinces Purtaming to the incidents   |  |  |  |
|     |   | Aned Northing 92ts REsolved. There was not And   |  |  |  |
|     |   | has not been any Arbitration on my of the matter   |  |  |  |
|     |   | Note: As additional support for the facts of your claim, you may attach to this  |  |  |  |
|     |   | complaint a copy of your charge filed with the Equal Employment Opportunity  |  |  |  |
|     |   | Commission, or the charge filed with the relevant state or city human rights division.)  |  |  |  |
| IV. | Exhau   | stion of Federal Administrative Remedies   |  |  |  |
|     | A.  | A. It is my best recollection that I filed a charge with the Equal Employment Opportunity Commission or my Equal Employment Opportunity counselor regarding the defendant's alleged discriminatory conduct on (date) |  |  |  |
|     | B. The Equal Employment Opportunity Commission (check one): |  |  |  |  |
|     |   | has not issued a Notice of Right to Sue letter.  |  |  |  |
|     |   | issued a Notice of Right to Sue letter, which I received on (date)   |  |  |  |
|     |   | (Note: Attach a copy of the Notice of Right to Sue letter from the Equal Employment Opportunity Commission to this complaint.)   |  |  |  |
|     | C.  | Only litigants alleging age discrimination must answer this question.  |  |  |  |
|     |   | Since filing my charge of age discrimination with the Equal Employment Opportunity Commission regarding the defendant's alleged discriminatory conduct (check one):  |  |  |  |
|     |   | 60 days or more have elapsed.  less than 60 days have elapsed.   |  |  |  |
|     |   |  |  |  |  |

## V. Relief

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages.

| 200,000  |            |          |            |      |
|----------|------------|----------|------------|------|
| MUDU     | has filled | to PROPE | Uy REPRES  | SENH |
| mi       |            |          |            |      |
| エか       | ave been   | MISRIPA  | istaltal b | y mx |
| (Anliox) |            |          |            | ,    |

## VI. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a non-frivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

## A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where caserelated papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

| Date of signing: 9-6      | , 20/.6 | . >     |           |
|---------------------------|---------|---------|-----------|
| Signature of Plaintiff    | andi    | al 2    |           |
| Printed Name of Plaintiff | XUME    | Collier | - 1) one. |

| В. | For Attorneys            | •     |   |
|----|--------------------------|-------|---|
|    | Date of signing:         | _, 20 |   |
|    | Signature of Attorney    |       | ! |
|    | Printed Name of Attorney |       |   |
|    | Bar Number               |       |   |
|    | Name of Law Firm         |       |   |
|    | Address                  |       |   |
|    | Telephone Number         |       | ! |
|    | F-mail Address           |       |   |